



PTO/SB/21 (05-03)

Approved for use through 04/30/2003. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>	<b>Application Number</b>	10/642,924	
	<b>Filing Date</b>	March 31, 2004	
	<b>First Named Inventor</b>	YALURIS, George et al.	
	<b>Group Art Unit</b>	1764	
	<b>Examiner Name</b>	WRIGHT, William G.	
<b>Total Number of Pages in This Submission</b>	6	<b>Attorney Docket Number</b>	W9556-02

ENCLOSURES <i>(check all that apply)</i>		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i>
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	Return Post Card.
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	_____
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	_____
<input type="checkbox"/> Response to Missing Parts/Incomplete Application	<b>Remarks</b>	_____
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		_____

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Beverly L. Astale
Signature	
Date	March 31, 2004

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Signature			
Typed or printed name	Debra P. Darcey	Date	March 31, 2004

Toolawntator Inc



04-01-041

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of : Date: March 31, 2004  
Yaluris et al. : Group Art Unit: 1764  
Serial No. 10/642,924 : Examiner: Wright, William G.  
Filed: August 18, 2003 : Docket No.: W9556-02  
For: NO<sub>x</sub> Reduction Compositions for Use In FCC Processes

PRELIMINARY AMENDMENT

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Please enter this Preliminary Amendment in the above-identified application.

**Amendments to the Claims** are reflected in the listing of claims which begin on page 2 of this paper.

**CERTIFICATE OF MAILING UNDER 37 C.F.R. §1.8**

Pursuant to 37 CFR §1.8, I hereby certify that I have a reasonable basis to expect that this correspondence will be deposited with the United States Postal Service on or before the date indicated, as First Class mail, in an envelope addressed to: Mail Stop: Amendments, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

3/31/2004  
Date

Debra P. Yaluris  
Signature